



# Work Order (Bid Form)

## WORK ORDER INFORMATION

*Work Order Name:*

*Work Order Type:* Weatherization

*Audit Name:* MADISON

## CLIENT INFORMATION

*Client Name:*

*Address:*

*Client ID:*

*Alt. Client ID:* 16016SW-1060

## AGENCY INFORMATION

*Agency:* SWHRA

*Agency Phone:* (731) 989-5111

*Address:* 1574 White AVE  
Henderson, TN

*Fax:*

*Email Address:*

*Agency Contact:* Oliver, Jerry

*Work Phone:*

*Cell Phone:*

*Email Address:*

*Company Name & License Number:* \_\_\_\_\_

*Contractor's Signature:* \_\_\_\_\_

## COMMENT

NOTICE:

All work performed and material must meet all requirements as stated in the Southeast Weatherization Field Guide. It is the contractor's responsibility to pull all necessary permits required for the town or county where the work is being performed. No change order work shall be done until the change order has been approved and signed. If heater is required no air sealing should be done before heater is installed.

731-424-4433

# Measures

| Measure 1 Infiltration Redctn |                                 |   |       | Components |                      |                      | Inspected                |                      |                      |
|-------------------------------|---------------------------------|---|-------|------------|----------------------|----------------------|--------------------------|----------------------|----------------------|
| Comment                       |                                 |   |       |            |                      |                      | <input type="checkbox"/> |                      |                      |
|                               |                                 |   |       | Estimated  |                      | Actual               |                          |                      |                      |
| #                             | Material / Labor                | Description / Comment   | Units | Qty        | Unit Cost            | Total                | Qty                      | Unit Cost            | Total                |
| 1                             | Construction Materials/Hardware | Seal breaker box and hole by breaker box,Seal hole in wall by water heater, Seal walls behind washer and dryer, Seal beam from sunken den to living room            | Each  | 1          | <input type="text"/> | <input type="text"/> | <input type="text"/>     | <input type="text"/> | <input type="text"/> |
| 2                             | Labor                           | Labor   | Hour  |            | <input type="text"/> | <input type="text"/> | <input type="text"/>     | <input type="text"/> | <input type="text"/> |
| 3                             | Construction Materials/Hardware | Seal wall in bedroom by behind tub,Seal ceiling around return air, Seal under bath vanity and wall in closet, Seal door jam between hall and bedroom                | Each  | 1          | <input type="text"/> | <input type="text"/> | <input type="text"/>     | <input type="text"/> | <input type="text"/> |
| 4                             | Labor                           | Labor   | Hour  |            | <input type="text"/> | <input type="text"/> | <input type="text"/>     | <input type="text"/> | <input type="text"/> |
| 5                             | Construction Materials/Hardware | Seal old flu in bedroom and closet in same bedroom, Seal crown molding in west living room. Seal exhaust vent over cook stove, Seal closet in hall around vent pipe | Each  | 1          | <input type="text"/> | <input type="text"/> | <input type="text"/>     | <input type="text"/> | <input type="text"/> |
| 6                             | Labor                           | Labor   | Hour  |            | <input type="text"/> | <input type="text"/> | <input type="text"/>     | <input type="text"/> | <input type="text"/> |
| 7                             | Construction Materials/Hardware | Caulk all windows and replace broke glass in S1,S2 and E2 windows   | Each  | 1          | <input type="text"/> | <input type="text"/> | <input type="text"/>     | <input type="text"/> | <input type="text"/> |
| 8                             | Labor                           | Labor   | Hour  |            | <input type="text"/> | <input type="text"/> | <input type="text"/>     | <input type="text"/> | <input type="text"/> |

**Other Detail**

|  |  |  |  |  |  |  |  |  |
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|  |  |  |  |  |  |  |  |  |

**Measure Sub Total:**  **Sub Total:**

**Field Notes:****Measure 2 DWH Pipe Insulation****Components****Inspected****Comment**

| # | Material / Labor | Description / Comment | Units | Qty | Estimated            |                      | Actual               |                      |                      |
|---|------------------|-----------------------|-------|-----|----------------------|----------------------|----------------------|----------------------|----------------------|
|   |                  |                       |       |     | Unit Cost            | Total                | Qty                  | Unit Cost            | Total                |
| 1 | Insulation       | DHW Pipe Insulation   | Each  | 1   | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 2 | Labor            | Labor                 | Each  | 1   | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

**Other Detail**

|  |  |  |  |  |  |  |  |  |
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**Measure Sub Total:**  **Sub Total:**

**Field Notes:**

**Measure 3 Attic Ins. R-30****Components A1****Inspected****Comment**☐

| # | Material / Labor                | Description / Comment                     | Units | Qty  | Estimated            |                      | Actual               |                      |                      |
|---|---------------------------------|---|-------|------|----------------------|----------------------|----------------------|----------------------|----------------------|
|   |                                 |   |       |      | Unit Cost            | Total                | Qty                  | Unit Cost            | Total                |
| 1 | Insulation                      | Attic Insulation - Blown Cellulose - R-30 | SqFt  | 1477 | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 2 | Labor                           | Labor                                     | Hour  | 1477 | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 3 | Construction Materials/Hardware | Install attic access cover                | Each  | 1    | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 4 | Labor                           | Labor                                     | Hour  |      | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

**Other Detail**

|                      |                      |                      |                      |                      |                      |                      |                      |                      |
|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

**Measure Sub Total:****Sub Total:****Field Notes:****Measure 4 Storm Windows****Components E2,N4,N1,S4,E1****Inspected****Comment**☐

| # | Material / Labor | Description / Comment | Units | Qty   | Estimated            |                      | Actual               |                      |                      |
|---|------------------|-----------------------|-------|-------|----------------------|----------------------|----------------------|----------------------|----------------------|
|   |                  |                       |       |       | Unit Cost            | Total                | Qty                  | Unit Cost            | Total                |
| 1 | Windows          | Storm Window          | Each  | 5     | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 2 | Labor            | Labor                 | Each  | 68.97 | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

**Other Detail**

|                      |                      |                      |                      |                      |                      |                      |                      |                      |
|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

**Measure Sub Total:****Sub Total:****Field Notes:**

Client Name:

Client ID:

Alt. Client ID: 16016SW-1060

**Work Order (Bid Form)**

Work Order Name:

Report Run On: 5/25/2010

DOE Weatherization Assistant

Version 8.5.0

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| Measure 5 CO Monitor is Needed |                         |                       |                      | Components           |                      |                      |                      | Inspected            |                      |
|--------------------------------|-------------------------|-----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| Comment                        |                         |                       |                      |                      |                      |                      |                      |                      |                      |
|                                |                         |                       |                      | Estimated            |                      | Actual               |                      |                      |                      |
| #                              | Material / Labor        | Description / Comment | Units                | Qty                  | Unit Cost            | Total                | Qty                  | Unit Cost            | Total                |
| 1                              | Health and Safety Items | CO monitor            | Each                 | 1                    | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 2                              | Labor                   | Labor                 | Hour                 | 1                    | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <b>Other Detail</b>            |                         |                       |                      |                      |                      |                      |                      |                      |                      |
| <input type="text"/>           | <input type="text"/>    | <input type="text"/>  | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/>           | <input type="text"/>    | <input type="text"/>  | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <b>Measure Sub Total:</b>      |                         |                       |                      |                      |                      | <input type="text"/> | <b>Sub Total:</b>    |                      |                      |
| <b>Field Notes:</b>            |                         |                       |                      |                      |                      |                      |                      |                      |                      |

| Measure 6 PressureRelief Piping Needed |                         |                        |                      | Components           |                      |                      |                      | Inspected            |                      |
|--|-------------------------|------------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| Comment                                |                         |                        |                      |                      |                      |                      |                      |                      |                      |
|  |                         |                        |                      | Estimated            |                      | Actual               |                      |                      |                      |
| #                                      | Material / Labor        | Description / Comment  | Units                | Qty                  | Unit Cost            | Total                | Qty                  | Unit Cost            | Total                |
| 1                                      | Health and Safety Items | Pressure relief piping | Each                 | 1                    | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 2                                      | Labor                   | Labor                  | Hour                 | 1                    | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <b>Other Detail</b>                    |                         |                        |                      |                      |                      |                      |                      |                      |                      |
| <input type="text"/>                   | <input type="text"/>    | <input type="text"/>   | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/>                   | <input type="text"/>    | <input type="text"/>   | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <b>Measure Sub Total:</b>              |                         |                        |                      |                      |                      | <input type="text"/> | <b>Sub Total:</b>    |                      |                      |
| <b>Field Notes:</b>                    |                         |                        |                      |                      |                      |                      |                      |                      |                      |

|                                |                      |
|--------------------------------|----------------------|
| <b>Work Order Grand Total:</b> | <b>Grand Total:</b>  |
| <input type="text"/>           | <input type="text"/> |